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FÉE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 921.00

Complete if Known			
Application Number	10/622,843		
Filing Date	July 18, 2003	0.0	
First Named Inventor	Harold Wiesmann, et al.		
Examiner Name			
Art Unit	1763		
Attorney Docket No.	BSA 03-01		

METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)						
Check Credit card Money Other None	. ADDITIONAL FEES	a state of a				
Order Order	rge Entity Small Entity					
Deposit Account 02-3977	ee Fee Fee Code (\$) Code (\$)	Fee Description <u>Fee Paid</u>				
Number	051 130 2051 65 Su	rcharge - late filing fee or oath 65.00				
Deposit Account		rcharge - late provisional filing fee or ver sheet				
Name The Director is authorized to: (check all that apply)		on-English specification				
Charge fee(s) indicated below Credit any overpayments	812 2,520 1812 2,520 For	r filing a request for ex parte reexamination				
Charge any additional fee(s) during the pendency of this application		equesting publication of SIR prior to caminer action				
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		equesting publication of SIR after kaminer action				
FEE CALCULATION	251 110 2251 55 Ex	xtension for reply within first month				
1. BASIC FILING FEE	252 410 2252 205 Ex	xtension for reply within second month				
Large Entity Small Entity	253 930 2253 465 Ex	xtension for reply within third month				
Fee Fee Fee Fee Description Fee Paid	254 1,450 2254 725 Ex	xtension for reply within fourth month				
Code (\$) Code (\$) 1001 750 2001 375 Utility filing fee [395.00.]	255 1,970 2255 985 Ex	xtension for reply within fifth month				
1001 750 2001 375 Offinity liming lee 385.00	401 320 2401 160 No	otice of Appeal				
1003 520 2003 260 Plant filing fee	402 320 2402 160 Fil	iling a brief in support of an appeal				
1004 750 2004 375 Reissue filing fee	403 280 2403 140 Re	equest for oral hearing				
1005 160 2005 80 Provisional filing fee	451 1,510 1451 1,510 Pe	etition to institute a public use proceeding				
SUBTOTAL (1) (\$) 385.00	452 110 2452 55 Pe	etition to revive - unavoidable				
	453 1,300 2453 650 Pe	etition to revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	501 1,300 2501 650 Ut	tility issue fee (or reissue)				
Extra Claims below Fee Paid	502 470 2502 235 De	esign issue fee				
Total Claims 58 .20** = 38 X 9 = 342.	503 630 2503 315 PI	lant issue fee				
Independent 6 - 3** = 3 x 43 = 129. Claims Multiple Dependent	460 130 1460 130 Pe	etitions to the Commissioner				
	807 50 1807 50 Pi	rocessing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Fee Description		ubmission of Information Disclosure Stmt				
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021 40 8021 40 Re	ecording each patent assignment per operty (times number of properties)				
1201 84 2201 42 Independent claims in excess of 3	809 750 2809 375 Fil	iling a submission after final rejection				
1203 280 2203 140 Multiple dependent claim, if not paid	810 750 2810 375 Fo	or each additional invention to be				
1204 84 2204 42 ** Reissue independent claims over original patent		xamined (37 CFR 1.129(b)) Request for Continued Examination (RCE)				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		Request for expedited examination f a design application				
SUBTOTAL (2) (\$) 471.00	Other fee (specify)					
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 65.00						
SUBMITTED BY (Complete (if applicable)						

Name (Print/Type) Margaret C. Bogosian Registration No. (Attornev/Agent) 25,324 Telephone 631-344-7338

Signature Date 11/19/03

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

- □ design
- supplemental
- □ national stage of PCT
- □ divisional
- □ continuation
- □ continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

"Fluorinated Precursors of Superconducting Ceramics, and Methods of Making the Same"

SPECIFICATION IDENTIFICATION

the specification of which:

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(b)	⊠	was fil	ed on	Ju	ly	18, 2	2003	as	Seri	lal	No.		
		10/_622	2,843	or		Expre	ss Ma	ail	No.,	as	Seria	1 No	٠.
		not yet	knowr	1							and	was	
		amended	d on										

(c)	was described	and	claimed	in :	PCT	Internat	cional
	Application No.						filed
	on			and	las	amended	under
	PCT Article 19	on		_		•	

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information of which I am aware which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56 and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent.

PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent inventor's certificate or of any PCTinternational application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

- (d) on such applications have been filed.
- (e) □ such applications have been filed as follows.

A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

Country (or indicate if PCT)	Application No.	Date of Filing (day, month, year)	Priority Claimed Under 37 USC 119
			□ Yes □ No
			□ Yes □ No
	·		□ Yes □ No
		·	□ Yes □ No
			□ Yes □ No

AL	L FOREIGN APPLICATION(S), IF AN (6 MONTHS FOR DESIGN) PRIOR 1	
	POWER OF AT	TORNEY
and 5	I hereby appoint the following ecute this application and transfrademark Office connected ther	sact all business in the Patent
<u>name</u>	and Registration No.	·
	Margaret C. Bogosian Registration No. 25,324	Lori-Anne Neiger Registration No. 44,949
	Christine L. Brakel, Ph.D Registration No. 45,772	
SEND	CORRESPONDENCE TO Margaret C. Bogosian Patent Counsel Brookhaven National Laboratory Bldg. 475D P.O. Box 5000 Upton, NY 11973-5000	DIRECT TELEPHONE CALLS TO: Margaret C. Bogosian (631) 344-7338

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE (S)

Full name of sole or first inventor

Harold		Wiesmann
(Given Name)	(Middle Initial or Name)	Family (or last name)
Inventor's signature		
Date ///14/03	Country of Citi	zenship_USA
Residence Stony Broo	ok, New York	
Post Office Address_	32 Meadow Drive	
	Stony Brook, New Yo	ork 11790
Full name of second	joint inventor, if a	ny
Vyacheslav .	(Middle Teillin News)	Solovyov
Given Name)	(Middle Initial or Name)	Family (or last name)
Inventor's signature	e Ceep	
Date //. /4, 2003	Country of Citi:	zenship <u>Ukranian</u>
Residence Rocky Poir	nt, New York	
Post Office Address_	104 Maple Road	
	Rocky Point, New Yor	k 11778

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor.

Number of pages added

* * *

- Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added
- \square Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time (37 CFR 1.47).

* * *

- Added pages to combined declaration and power of attorney for divisional, continuation or continuation-in-part (C-I-P) application.
 - □ Number of pages added

* * *

Authorization of attorney(s) to accept and follow instructions from representative.

* * *

(If no further pages form a part of this Declaration, then end this Declaration with this page and check the following item:)

☑ This declaration ends with this page.